

COMPLIANCE PLAN

PURPOSE: County of San Diego (COSD), Health and Human Services Agency (HHSA), maintains a Compliance Office with distinct responsibilities of developing and upholding policies and procedures designed to provide robust internal controls to prevent fraud, waste, and abuse within HHSA programs.

COMPLIANCE PLAN ELEMENTS:

CODE OF ETHICS:

COSD Code of Ethics is maintained by COSD Office of Ethics and Compliance and updated as appropriate. Employees are required to sign an acknowledgement of understanding and commitment to uphold the Code of Ethics upon initial hiring with the County.

CODE OF CONDUCT:

HHSA maintains a distinct Code of Conduct which supplements the COSD Code of Ethics and provides additional employee standards to provide assurances for adherence to federal and State regulatory requirements for the various HHSA programs. HHSA employees are required to certify their review, understanding, and agreement to abide by the HHSA Code of Conduct at time of hire, and annually thereafter.

STATEMENT OF INCOMPATIBLE ACTIVITIES:

To provide internal control to ensure employees within HHSA refrain from activities which would create a conflict of interest with their COSD program employment, HHSA Department of Human Resources maintains signed Statement of Incompatible Activities from HHSA employees, which are filled out during initial hire, and semi-annual thereafter.

POLICIES AND PROCEDURES:

HHSA Compliance Plan Policies and Procedures are categorized into three distinct areas: (1) Compliance, (2) Privacy, and (3) Information and Data Security. These Policies and Procedures are reviewed at minimum every two years to ensure compliance with current regulatory requirements. Compliance Plan Policies and Procedures may be found on COSD HHSA Insite (intranet).

COMPLIANCE OFFICER:

HHSA has a designated Compliance Officer, reporting directly to the HHSA Agency Director. The Compliance Officer sits on the HHSA Executive Leadership team and oversees the Compliance Office staff consisting of specialized Privacy Officers.

COMPLIANCE COMMITTEE:

The HHSA Compliance Committee develops strategy and policy as it relates to the Agency Compliance Plan. The Committee includes, at minimum, the HHSA Agency Director, HHSA Compliance Officer, HHSA County Counsel and HHSA Chief Operations Officer.

COMPLIANCE OFFICE TRAINING AND EDUCATION:

HHSA Compliance Officer is required to complete, at minimum, 40 hours of Continuing Education Units every two years, with an emphasis on health care program compliance elements. Preferably, HHSA Compliance Officer will maintain certification with the Society of Corporate Compliance and Ethics, or similar organization.

HHSA EMPLOYEE COMPLIANCE TRAINING:

HHSA Compliance Office shall deliver Compliance Training to HHSA employees annually. Components of training may be specific to programmatic elements, or general training, depending on employee position and program requirements. Additionally, training may be provided in a variety of delivery methods including live, attestation, or through HHSA's online Learning Management System (LMS). HHSA Human Resources maintains records of employee training.

CONFIDENTIAL REPORTING:

COSD and HHSA manage confidential reporting systems which allow for employees, contractors and members of the public to reporting any suspected violations of County and HHSA policy or procedure in a secure method. In addition to the confidential methods, employees, contractors and members of the public may contact the HHSA Compliance Office to discuss any suspected violations. Compliance Office contact information is published on both internal and external County websites. Additionally, posters which outline the COSD confidential hotline are required to be posted in all HHSA facilities and at the facilities of contracted providers as detailed in contract agreement specifications.

All reported suspected violations are thoroughly investigated and reporters who have requested feedback are contacted with notification of the investigation closure, although documents and details relating to the investigation remain confidential unless referral to an outside agency is required.

INTERNAL AUDITING AND MONITORING:

COSD and HHSA both maintain internal auditing programs to ensure compliance with federal and State regulations. HHSA internal monitoring may occur at the program level through Quality Management reviews, or through Contract or Compliance reviews which are based upon organizational risk.

SANCTION SCREENING:

HHSA will not knowingly engage, employ or otherwise do business with any individual or entity who is excluded, debarred, suspended or declared ineligible from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549, or who has been suspended or declared ineligible by the State from participating in the Medi-Cal program.

All employees are screened for Sanctions prior to employment, and monthly thereafter. Contractors are screened semi-annually by the HHSA Agency Contract Support division, and contractors are required to perform screening for their employees as noted in Agreement language.

Questions regarding this Compliance Plan should be directed to:

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